

COMMONWEALTH of VIRGINIA

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES 600 East Broad Street, Suite 1300 Richmond, VA 23219

October 22, 2008

ADDENDUM No. 1 TO VENDORS:

Reference Request for Proposal: RFP 2008-07

Dated: September 18, 2008 Due: November 20, 2008

Delete existing §9.2 and replace with the following:

9.2 Proposal Evaluation Criteria

Criteria	
1. General quality and adequacy of response	<u>10%</u>
Agreement to comply with all general and specific requirements and conditions (Sections 3 and 4).	
Responsiveness to information furnished and goals Stated in Scope of Work (Section 3).	
Demonstrated knowledge of Medicaid eligibility State and Federal policies and procedures.	
Audit hours available to perform Department audits under contract.	
Clear understanding of the project as demonstrated in the responses to the RFP.	
2. Proposal/Work Plan for Completion of the PERM Reviews	<u>25%</u>
The clarity and completeness of the proposal related to the Offeror's approach to and completion of the audits and management of the assigned personnel.	
The lead-time to begin an audit, and the turn around time to complete the expected work.	
The work plan distribution of person hours for each part of the project	
3. Contractor Qualifications	
Qualifications of personnel	
Prior experience with similar projects.	
Identified conflicts	
Appropriateness of the relationship between staff qualifications and assigned responsibilities	
Capability of the personnel assigned to the project to audit for compliance with applicable state and Federal Medicaid eligibility regulations and policies, to determination a finding of misspent funds if appropriate, and to produce working papers that support conclusions reached in the audit	

engagement.	
Capability of the project director to successfully manage the project.	
4. Quality of References	5%
References who clearly address the nature of the work performed by the Offeror	
References who exhibit satisfaction with the work performed by the Offeror	
Contacts for other contracts who exhibit satisfaction with the work performed by the Offeror.	
5. Small Business Subcontracting Plan	20%
6. Cost	15%

Please note that the due date has been extended to November 20, 2008.

Note: A signed acknowledgment of this addendum must be received by this office either prior to the due date and hour required or attached to your proposal response. Signature on this addendum does not substitute for your signature on the original proposal document. The original proposal document must be signed.

Sincerely,

William D. Sydnor

William D. Sydnor Contract Management Director

Name of Firm:	
Signature and Title: _	
Date:	